

NDI Insider

The newsletter of Indiana's

NeuroDiagnostic Institute
and Advanced Treatment Center

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NDI JANUARY EMPLOYEES OF THE MONTH

HERE ARE THE RAVE REVIEWS ABOUT THIS MONTH'S STAR PERFORMERS

[Our NDI Nursing Night Shift Star of the Month is Ashley Crowe](#)

Takes on every assignment anywhere with the same dedication as her home unit, fast and effective

[Our NDI Nursing Day Shift Star of the Month is Matt Thompson](#)

For just being awesome. Detail-Assistance-Restraints-Accountable. Every place needs a Matt Thompson

[Our NDI Non-Nursing Star of the Month is Jamie Tuggle](#)

Taking on the challenges of developing regulated/safe programming opportunities for a very challenging youth population where the possibility for such opportunities is limited due to the challenges with the patient population

IN RECOGNITION OF THIS HONOR, OUR STARS OF THE MONTH ARE ENTITLED TO PARK IN THE NDI SURFACE LOT THROUGHOUT THE MONTH OF JANUARY!



The NeuroDiagnostic Institute and Advanced Treatment Center, Indiana's newest state psychiatric hospital, delivers advanced evaluation and treatment for patients with the most challenging and complex neuropsychiatric illnesses and moves them more efficiently into the most appropriate treatment settings within the community or state mental health system.

NDI DASHBOARD – JANUARY 2021

Bridge Building Refreshers

1/5/22 DAY SHIFT
1/5/22 NIGHT SHIFT
1/26/22 DAY SHIFT

CPR Refreshers

1/4/22
1/25/22

General Orientation

1/10/22-1/14/22

CENSUS

- Adult-45
- Youth-13
- Damar-5
- Total-63

DECEMBER ADMISSIONS

- Adult-12
- Youth-3
- Damar-4
- Total-19

DECEMBER DISCHARGES

- Adult-9
- Youth-5
- Damar-5
- Total-19



NEWS FROM THE EMPLOYEE RECOGNITION COMMITTEE

BY JEFFERY CLEARWATER

The ERC had an increase in nominations of Employee of the Month for January. A great BIG thank you to all of you who took the time to nominate one of your peers. It is a very thoughtful thank you for great teamwork!

The following people were nominated: Rebecca Altop, Ashley Murphy, Robert Feczko, Amy Jahnke, Rachel Patterson, Chelsea Hardin, Shanelle Justice, Thomas Scott Ball, Doreen Brunner, Amanda Batson, and Sunny Moseby.



Congratulations to all who were nominated



There is now an easier way to nominate employees for Employee of the Month and for Certificates of Excellence. Just send an email to: ERCNDI@fssa.in.gov. You now can add your name for nominating someone or keep it anonymous.

We all hope you have enjoyed this year's activities and the holiday dinner provided on December 15, 2021. We look forward to providing more activities in 2022.

Our next meeting is scheduled for Wednesday, January 19th at 2:30 pm. Reach out to me, Marti Coffey, Vicky Tucker, Vernell Martin or any other ERC member. We are glad to bring you in! Happy New Year everyone!

CHAPLAIN'S CORNER



Happy New Year - 2022

As we enter a new year, I wish each of us a happy and joyous new beginning. I wish peace, love, hope, and joy for each person who reads this short note.

Life is difficult and this past year has been one of a continued "new" normal. I was recently reminded that often our lives seem to travel through cycles and our entire population continues to experience a cycle of transformation. Transformation is to be changed into a new creation. Change is difficult and can be down right frightening, however our perception of current events makes all the difference. A person can assume doom and gloom or sunshine on a cloudy day as the "Temptations" sang about. The question is what gives us hope? What generates peace in the middle of the storm clouds? In times of great change each of us needs a place in our lives that gives us solid ground to stand on so that we might gain a sense of direction for our lives. During our recent family Christmas gathering everyone was asked to share a favorite scripture from our faith. I shared a verse that spoke of loving others by feeding and tending to them. That's what we do in healthcare. We feed and tend to those who cannot care for self. Spiritually this care translates to giving hope to those without. I shared with our family that we love and serve those without hope by holding hope for them until they can discover it for themselves. We give hope by serving one another.

I hold hope for each of you and say to each colleague at NDI, grace and peace.

Chaplain Madren

W.I.I.F.M

BY CHRIS KERL, STAFF DEVELOPMENT AND EMERGENCY MANAGEMENT DIRECTOR

No, it's not a new radio station ☺ Yes, it is yet another acronym to fill your head. It is just one of many concepts of learning that Staff Development will bring to you in 2022. Whether it is Annual Required Training, Bridge Building, CPR, or one of the new upcoming trainings we plan to offer, this concept will play an important part in your learning.

WIIFM stands for *What's in it for me?* As adult learners we want to know this right away. Besides the obvious need to complete the training because it is required, why else do we train? Some researchers believe it takes **between 1000 and 30,000 repetitions** of an activity for it to become second nature to you. The more you practice something, the more it sticks. So although it may be a pain to do Bridge Building yearly, it is necessary to increase our skills and have it stick for the safety of our patients and our staff.

One may ask the WIIFM question regarding Non-Direct Care Bridge Building and/or being required to be Certified in CPR when we do not work directly with patients. For me, the WIIFM is quite easy to see. Having skills to verbally de-escalate situations, and skills to protect oneself, if needed, is handy in today's world in general. You never know when and if you may need to use CPR skills on a co-worker, family member, or neighbor in time of need. My personal WIIFM around training is that the more training I have, the more tools I have in my toolbox to draw upon in any given situation.

Are there additional tools you would like to have in your toolbox? Success Factors Learning offers several e-learning opportunities on a broad range of topics. You can search for a topic, self-enroll in a class, and upon completion, the training will be recorded in your training records. Supervisors, you can assign certain trainings to your staff as well. I highly recommend checking it out!

Another exciting tidbit is that there is an Indiana State Psychiatric Hospital Network (ISPHN) Library of e-learning training for all 6 hospitals to begin using and it will be increasing the number of available trainings as the year progresses! If you have questions regarding e-learning, please feel free to contact NDI Staff Development any time.



2022 is looking BRIGHT



CERTIFICATES OF EXCELLENCE

Angela Bennett
Lisa Canada
Pam Conover
Jason King
Justin McAfee
Will Morris
Diondrae Rice
Matt Thompson

Niki Brinker
Jeffery Clearwater
Amy Frazer
Bernadeth Majesky
Caitlin Montgomery
Kayode “Henry” Oladimeji
Sharon Salinetto
Vicky Tucker

Lauren Butler
Marti Coffey
Gerald Garrett
Vernell Martin
Vonda Montgomery
Lisa Passarelli
Annie Self



Anyone can nominate a fellow employee for a Certificate of Excellence. **Be sure to include the following information:** Name of recipient, recipient’s supervisor, brief statement of why you wish to recognize your colleague. The Employee Recognition Committee (ERC) is responsible for the administration of NDI’s Certificate of Excellence awards. All recommendations should be sent to Lisa Canada (Lisa.Canada@fssa.IN.gov) or to the new NDI ERC email box (ERCNDI@fssa.in.gov)



January



BIRTHDAYS

Toheeb Aderemi
Angela Bennett
Emily Davis
Tim Gaalema
Terrie Inman
Taliyah Peggins
Sonya Sumerford
Angel Venable
Michele Wood

Simeon Adehinmoye
Erica Campbell
Jassmin Downey
Marc Gordon
Kristen McCarrick
Deb Raughter
Kimberly Thomas-Oliver
Christine Wardwell

Sarah Bassler
Ashley Crowe
Lindsay Ecklund
Dorothy Holmes-Day
Henry Oladimeji
Cassandra Strong
Matt Thompson
Cindy Wilson

MIND MATTERS

NDI's latest community outreach comes to us in the form of 12 educational webinars. These short, content-filled webinars take place on **Wednesdays at noon** every two weeks.

Each Webinar runs under 30 minutes with time allotted for a live Q and A, perfect for any lunch-time learners. They are also free to the public.

Please join us for our next presentation on January 4th at 12 noon when Dr. Hannah Versino will discuss Trauma Informed Parenting.

Our previous Mind Matters presentations are located here: [L:\Video Work\Mind Matters](#)

Tell your friends, share the registration link below, and join on us for upcoming Mind Matters presentations!

<https://www.eventbrite.com/e/mind-matters-trauma-informed-care-101-tickets-181371094827>

Questions? Contact NDI's Education Community Liaison Director Justin McAfee. His desk is at W125, Vocera, or email: justin.mcafee@fssa.in.gov



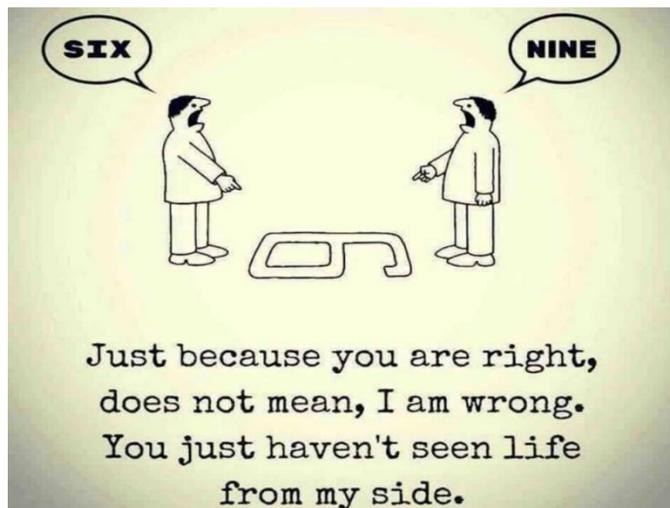
Dr. Kellee Hawkins-Coleman, Clinical Director
Christopher Kerl, Staff Development Director

Trauma Informed Care “Tidbits”

Safety

Did you know?

- **Safety** is the first of six principles of a Trauma Informed Care (TIC) organization.
- The Substance Abuse & Mental Health Services Administration (SAMHSA) defines safety in a Trauma Informed Care (TIC) organization as: “...throughout the organization, staff and the people they serve, whether children or adults, feel physically and psychologically safe; the physical setting is safe and interpersonal interactions promote a sense of safety”
- Safety can be subjective: what makes staff feel safe may not be what makes the individuals we serve feel safe:



A locked door may be perceived by staff as protection from what or who is one the other side; for the individuals we serve it could be perceived as a restriction of freedom and a barrier to those who could offer assistance.

- There are two main types of safety in a TIC organization: **physical and psychological**.
- **Physical safety** refers to the security of the facility, establishing policies & procedures on how to handle potentially dangerous situations, planning for disasters, adhering to client rights, working toward zero harm, and creating calming and soothing living areas.
- Disaster drills, and staff's active participation in them, are some ways we keep our environment safe.
- Staff recognizing, reporting, and working towards reducing or eliminating potential or actual environmental hazards are other ways we keep our environment safe.
- The lighting, color, noise level, and selection of furniture for a room can make it more calming and soothing for those who use it.
- The Joint Commission refers to High Reliability in healthcare as zero harm.
- Examples of zero harm include zero incidents of giving the wrong medication to the wrong individual, zero falls, and zero employee accidents or injuries.
- **Psychological safety** refers to how comfortable individuals feel expressing themselves without fear of negative consequences.
- To help individuals we serve feel safe, staff can adapt the environment (i.e., adjust seating arrangements) for those feeling triggered, maintain healthy interpersonal boundaries, manage conflict appropriately, and maintain consistent, open, and compassionate communication.
- These are some ways we can interact with others to help them feel psychologically safe: welcome, respect and support them, provide consistent schedules and procedures if possible. When not possible, give sufficient notice when changes need to occur.
- Staff feel psychologically safe when they are empowered, equipped with the proper tools to minimize risk in their environment, and supported.
- Empowering staff involves helping them to feel comfortable in making decisions and allowing them to provide input into policies & procedures.
- Equipping staff with the proper tools involves giving them access to information and adequate training.
- Annual training in Bridge Building or CPI, CPR, and Trauma Informed Care are ways in which our hospital keeps us safe.
- Individual efforts to improve safety can include following the policies & procedures in place that help to ensure safety, and making an effort to grow your own skill set by putting into practice the de-escalation techniques, TIC techniques, etc. that are taught to you.
- Supporting staff involves making self-care a priority.

Self-care tools for staff include

- Indiana 211
- Be Well Indiana – bewellindiana.com
- Employee Assistance Program for State Staff (800) 223-7723
- Resources from the psychology department.

Sources: SAMSHA 2014 a/b; NASMPHD 2005, 2008; Menschner & Maul, 2016;
<https://www.lensshift.org/library/six-nine-matter-of-perspective-cartoon>



HOLIDAY DINNER



Bernadeth Majesky



Lisa Canada, Vonda Montgomery, Lisa Passarelli



Vicky Tucker

A big THANK YOU to members of the Employee Recognition Committee who prepared hundreds of tasty meals for NDI employees on December 15th! They even went the extra mile to deliver them to the units for staff members who were unable to leave their assignments.

CREST TEAM

CARE AND RESTORATION THROUGH EMOTIONAL STRESS AND TRAUMA

Happy New Year everyone. As we begin 2022, I wanted to give a quick reminder that our CREST team is available for staff after a traumatic event. The CREST team is a CISM (Critical Incident Stress Management) group comprised of fellow staff who have been trained by the International Critical Incident Stress Foundation to offer support after events causing trauma.

The goal of CISM is to **normalize** staff reactions and thought, **mitigate the effects** of the critical incident stress, promote a **return to normal** productivity, assist in instilling a **renewal of compassion** in the workplace, help **stabilize** the workplace post event, and ensure that information shared will be strictly **confidential**.

As we have been learning in Trauma Informed Care each of us determines what is traumatic to us. Our patients have been through trauma and TIC makes the general assumption that everyone in society has experienced some level of trauma. CISM teams are deployed in societal events such as the recent tornado disaster in Kentucky but also in hospitals after challenging events for care teams.

At NDI we have challenging patients, and our staff work with high levels of stress. If your team has an event or series of events with one or more patients, the CREST team is available for a debriefing with the staff. Also note that we are available for one-to-one listening. **CISM is not therapy**, and we refer staff to **EAP** for further care if needed. Our goal is to provide confidential listening to help staff find balance again after experiencing abnormal events.

You can reach a member of the CREST team by saying “Crest Team” on your Vocera or by contacting one of the following team members directly:

Amanda Batson, Erin Clampitt, Kellee Hawkins-Coleman, Pamela Conover, Marc Gordon, Laurie Lee, Fred Madren, Kayode (Henry) Oladimeji, Brittany Paradiso, Lisa Passarelli, Todd Peters, and Tori Selznick

Chaplain Madren

EMERGENCY MANAGEMENT

By Chris Kerl, Emergency Management and Staff Development Director

DID YOU KNOW???

Emergency Management is everyone's responsibility. It starts with being prepared, being observant, and knowing the plan. With the potential of winter weather, I want to share the plan. It is located on the Hub: *Training/Emergency Operations Plan/Winter Storm Emergency Annex*

A winter storm (ice, sleet, large amounts of snow and wind) is a likely occurrence in Central Indiana

A winter storm is unique in the following ways

- Hours or days of advanced notice
- Storm paths and accumulation amounts are unpredictable
- Could last several days
- Little danger of property damage, injury, or loss of life
- Not necessary to stand up the Hospital Incident Management Team
- Normal hospital operations could be disrupted especially regarding a lack of staff
- Supplies from outside vendors may be interrupted or delayed

Definitions

Advisory – The potential for a Winter Storm Emergency activation exists

Alert – A Winter Storm Emergency activation is likely; prepare to notify hospital leadership via e-mail, text, or phone

Activation – Notify hospital leadership of a Code White Winter Storm Emergency via e-mail, text, or phone; Superintendent or designee may stand up the Hospital Incident Management Team.

Physical plant Director will notify all state direct care employee via when-to-work

Notification

The Superintendent or designee will declare a Code White Winter Emergency at their discretion, and will notify the physical plant Director of the level of activation by telephone

Responsibilities of Essential Staff

Direct Care Staff (Nurses and BHRAs) On Duty:

- All direct care staff are required to remain at their posts as a winter storm approaches or begins
- No direct care staff will be allowed to leave early except by permission of their

- supervisor
- Direct care staff may be held on duty until a replacement arrives
- Failure to remain will be considered job abandonment subject to discipline up to termination
- All direct care staff are urged to make personal preparedness plans necessary in order to remain at their posts. This includes child, elder or pet care

Direct Care Staff Off Duty:

- All shifts will report as scheduled
- Direct care staff who are scheduled but unable to report because of the weather must contact the hospital no fewer than 2 hours before their assigned shift so that a replacement may be located
- Staff unable to report may be authorized the use vacation, sick, or personal time so as to maintain income
- Incidents involving staff that fail to report or fail to notify will be referred to Human Resources for appropriate disciplinary action
- Those who are not scheduled but would like to report may call the hospital

Responsibilities of Maintenance/Environmental Services/Security

- On Duty: Expected to remain at the discretion of their supervisor
- Off Duty: Expected to report at the discretion of their supervisor

Responsibilities of All Other Staff

- Remain or report at the discretion of their supervisor

Essential Services

- The hospital will maintain staff sufficient for the basic care and safety of the patients
- Patient groups and activities will operate on a discretionary basis subject to staff availability
- Staff may be assigned to different functions as needed

Staff Support

- Shelter/Food: The hospital will provide food and sleeping arrangements for staff who are unable to return home due to inclement weather. The multi-purpose rooms, conference room (A, B, and or C) or a vacant unit will be designated and equipped for staff sleeping
- Time: All staff will report to designated areas as assigned by supervisors.

Demobilization

The Superintendent or designee will determine at what point to return the hospital to normal operations. The physical plant Director will notify on-duty staff via Vocera or overhead page, and off-duty staff via e-mail, text, or phone.



***OUT OF THE MOUNTAIN OF DESPAIR, A
STONE OF HOPE***

Dr. Martin Luther King, Jr.